Global Rheumatology Alliance/ILAR

Grant Application

1. **PROJECT TITLE**:
2. **Project Location(s)**:
3. **Project Description including needs assessment (Please include the number of patients that you project to add to the GRA Global Registry, details of how cases will be systematically identified, and any quality control procedures that are planned)** (500 word limit):
4. **Describe how this project will improve representation of your country in the GRA Global Registry and aid in local efforts to collect data for your population:**
5. **Select the target audience(s) for this funding (Physicians, health professionals, etc.) including how many per group:**

|  |  |  |
| --- | --- | --- |
| Please check all that apply | Target Audience | Anticipated Number |
|  | Physicians |  |
|  | Health Professionals |  |
|  | Other: (please specify) |  |

1. **What is the desired outcome of this project? How will outcomes be monitored and measured?**
2. **Outside of extenuating circumstances, can you commit to this project being completed in mid 2021?**

\_\_\_\_ YES

\_\_\_\_ NO

1. **Projected Budget allocation; Please include as much detail as possible how the funds will be used:**
2. **Who are the individuals responsible for conducting the project? Include contact information. The selected individuals will be required to provide a summary on progress to ILAR/GRA executive committee, biannually:**
3. **Please indicate one primary point of contact for all communications related to the project, including their contact information.** 
   1. Primary Point of Contact
      1. Name:
      2. Email:
      3. Phone:
      4. Mailing Address:
4. **In order to ensure optimal communication between ILAR projects and regional and national leagues of rheumatology, it is expected for you to communicate your proposal to those rheumatology organizations that may be affected by your proposed project.** 
   1. For regional leagues, please contact its president. Please list the names of the individuals within organizations (both regional and national) that you have communicated with about this project:

Deadline for Submission: March 26, 2021  
Submit Completed Application to [RheumCOVIDRegistry@UCSF.edu](mailto:RheumCOVIDRegistry@UCSF.edu)